Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF INDIANA	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Scott First name	-	First name
		Alan	_	AS LU
		Middle name		Middle name
		Lolmaugh		
		Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6048		

Debtor 1 Scott Alan Lolmaugh

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	10012 Quachita Court	If Debtor 2 lives at a different address:
		Fort Wayne, IN 46804 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Allen County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Tell the Court About vie chapter of the ankruptcy Code you are coosing to file under	Check one. (For a (Form 2010)). Als Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printer I need to p The Filing House is not re-	he entire fee when I file n you may pay. Typically, if y ur attorney is submitting you d address.	ny petition. Please cherou are paying the fee you repayment on your below. If you choose this opti	ock with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or mo half, your attorney may pay with a credit card or check	etails oney					
e chapter of the ankruptcy Code you are loosing to file under	Check one. (For a (Form 2010)). Als Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printer I need to p The Filing House is not re-	he entire fee when I file n you may pay. Typically, if y ur attorney is submitting you d address.	ny petition. Please cherou are paying the fee you repayment on your below. If you choose this opti	ack with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	etails oney					
ankruptcy Code you are loosing to file under	Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printe I need to p The Filling H but is not re	he entire fee when I file n you may pay. Typically, if y ur attorney is submitting you ad address. hay the fee in installments Fee in Installments (Officia	ny petition. Please cherou are paying the fee you repayment on your below. If you choose this opti	ack with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	etails oney					
•	Chapter 11 Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printer I need to put the Filling Head of the put the but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
ow you will pay the fee	Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printe I need to part Filing If the Filing If but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
ow you will pay the fee	Chapter 12 Chapter 13 I will pay the about how yorder. If you a pre-printe I need to part Filing If the Filing If but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
ow you will pay the fee	I will pay the about how order. If you a pre-printer I need to part Filing II request the but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
ow you will pay the fee	I will pay the about how yorder. If you a pre-printer I need to part Filing I I request the but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
ow you will pay the fee	about how yorder. If you a pre-printer I need to p The Filing I I request the but is not re-	you may pay. Typically, if your attorney is submitting your address. You have the fee in installments for installments (Official)	ou are paying the fee y ur payment on your bel . If you choose this opti	vourself, you may pay with cash, cashier's check, or mothalf, your attorney may pay with a credit card or check	oney					
	The Filing I I request the but is not re	Fee in Installments (Officia		ion, sign and attach the Application for Individuals to P	y the entire fee when I file my petition. Please check with the clerk's office in your local court for more details w you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with inted address.					
	☐ I request the but is not re	`	Form 103A).	the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay						
	but is not re	nat my ice be waived (10	<i>ng Fee in Installments</i> (Official Form 103A). st that my fee be waived (You may request this option only if you are filing for Chapter 7. By law,							
		our family size and you are	and may do so only if you unable to pay the fee	rour income is less than 150% of the official poverty line in installments). If you choose this option, you must fill ficial Form 103B) and file it with your petition.	e that					
ave you filed for	■ No.									
inkruptcy within the st 8 years?	☐ Yes.									
	Distric	:t	When	Case number						
	Distric	:t	When	Case number						
	Distric	<u> </u>	When	Case number						
e any bankruptcy	■ No									
ses pending or being ed by a spouse who is	☐ Yes.									
ot filing this case with ou, or by a business ortner, or by an filiate?										
	Debto	r		Relationship to you						
	Distric		When							
	Debto	r								
	Distric	<u> </u>	When	Case number, if known						
you rent your	□ No. Go to	o line 12.								
sidence?	■ Yes. Has	your landlord obtained an	eviction judgment again	nst you?						
	_ 100. ■	No. Go to line 12.								
		Yes. Fill out <i>Initial State</i> bankruptcy petition.	ment About an Eviction	a Judgment Against You (Form 101A) and file it with thi	S					
	ed by a spouse who is of filing this case with u, or by a business rtner, or by an filiate?	ses pending or being ed by a spouse who is tilling this case with u, or by a business rtner, or by an filliate? Debto District Debto Distric	ses pending or being ed by a spouse who is	ses pending or being ed by a spouse who is tilling this case with u, or by a business rtner, or by an illiate? Debtor District Debtor District When Debtor District When Ves. For you rent your sidence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction	ses pending or being de by a spouse who is at filling this case with u, or by a business rtner, or by an illiate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known Debtor Relationship to you Relationship to you District When Case number, if known Poyou rent your sidence? No. Go to line 12. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this					

Deb	Scott Alan Loimai	ugn		Case number (if known)
Par	Report About Any Bu	ısinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	y
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	oox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as)	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	ser (as defined in 11 U.S.C. § 101(6))
			☐ None of the abor	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o	under Subchapter V so that choosing to proceed under So statement, and federal income	e court must know whether you are a small business debtor or a debtor choosing to it can set appropriate deadlines. If you indicate that you are a small business debtor or subchapter V, you must attach your most recent balance sheet, statement of operations, ome tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		r 11, I am a small business debtor according to the definition in the Bankruptcy Code, and sed under Subchapter V of Chapter 11.
		☐ Yes.		r 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I er Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	r Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	No.		
	alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?		What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Scott Alan Lolmaugh

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Scott Alan Lolma	ugh		Case number	(if known)		
Part	t 6: Answer These Quest	ions for R	eporting Purposes				
	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,		ed in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ss debts? Business debts are debts that or through the operation of the busin			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts or business	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes.		u estimate that after any exempt prope e to distribute to unsecured creditors?	rty is excluded and administrative expenses		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	t 7: Sign Below						
For	you	I have ex	ramined this petition, and I declare u	under penalty of perjury that the inform	ation provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request	relief in accordance with the chapte	er of title 11, United States Code, speci	ified in this petition.		
		bankrupt and 357	cy case can result in fines up to \$25		property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Scott A	lan Lolmaugh e of Debtor 1	Signature of Debtor	2		
		Executed	d on May 19, 2021 MM / DD / YYYY	Executed on MM /	/ DD / YYYY		

			•	
Debtor 1 Scott Alan Lolma	ugh	Cas	e number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this per under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify tha	States Code, and have	explained the relief available under each	n chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, c schedules filed with the petition is incorrect.			
	/s/ Holly M. Ripke	Date	May 19, 2021	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Holly M. Ripke			
	Printed name			
	Ripke Law Firm name			
	4705 Illinois Road, Ste 101			
	Fort Wayne, IN 46804			
	Number, Street, City, State & ZIP Code			

ripkelaw@live.com

Email address

Contact phone **260-434-1990**

22290-02 INBar number & State

Fill	in this information to identify your case:		
Deb	otor 1 Scott Alan Lolmaugh First Name Middle Name Last Name		
	otor 2		
``	use if, filing) First Name Middle Name Last Name		
Unit	red States Bankruptcy Court for the: NORTHERN DISTRICT OF INDIANA		
Cas (if kn	e numberown)	_	ck if this is an nded filing
○ ti	ficial Forms 4000 um		
	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a infor your	s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		ing correct
Part	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,700.00
Part	2: Summarize Your Liabilities		
			liabilities
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	nt you owe
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	110.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,204.00
	Your total liabilities	\$	18,314.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,625.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,565.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Scott Alan Lolmaugh

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 2,369.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	110.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	110.00

Case 21-10600-reg Doc 1 Filed 05/19/21 Page 10 of 53

Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Scott Alan Lolma			
Debtor 2	First Name	Middle Name Last Name		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF INDIANA		
Case number				☐ Check if this is an
				amended filing
Official Fo	orm 106A/B			
Schedul	le A/B: Prop	erty		12/15
think it fits best. E information. If mo Answer every que	Be as complete and accura re space is needed, attach stion.	e items. List an asset only once. If an asset fits in more than or the as possible. If two married people are filing together, both ar a separate sheet to this form. On the top of any additional page	re equally responsible for su	pplying correct
Part 1: Describe	Each Residence, Building	j, Land, or Other Real Estate You Own or Have an Interest In		
1. Do you own or	have any legal or equitable	e interest in any residence, building, land, or similar property?		
■ No. Go to Pa	rt 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	Your Vehicles			
□ No ■ Yes				
3.1 Make:	Ford	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	F150	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	2000	Debtor 2 only	Current value of the	Current value of the
Approxima Other infor	te mileage:	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
		At least tille of the deptors and another	\$4.400.00	*
		Check if this is community property (see instructions)	\$1,100.00	\$1,100.00
4. Watercraft, a	ircraft, motor homes, A	TVs and other recreational vehicles, other vehicles, and	l accessories	
Examples: Boa	ats, trailers, motors, pers	onal watercraft, fishing vessels, snowmobiles, motorcycle ac	cessories	
■ No				
☐ Yes				
E Add the dell	or value of the portion	you own for all of your entries from Bort 2, including an	y ontring for	
		ou own for all of your entries from Part 2, including any Write that number here		\$1,100.00
	Your Personal and Hous have any legal or equit	ehold Items able interest in any of the following items?		Current value of the
20 you own of	any logar or equit	and many of the following Relia:	;	portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	Scott Alan Lolmaugh	Case number (if known)	
	<i>Exampl</i> e ☐ No	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenware		
	Yes.	Describe		
		Household goods		\$1,000.00
	Electron Example ■ No	nics les: Televisions and radios; audio, video, stereo, and digital including cell phones, cameras, media players, games		collections; electronic devices
	☐ Yes.	Describe		
		bles of value les: Antiques and figurines; paintings, prints, or other artwo other collections, memorabilia, collectibles	ork; books, pictures, or other art objects; stamp, coin	, or baseball card collections;
		Describe		
	Example No	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipous musical instruments Describe	oment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	No	ns oles: Pistols, rifles, shotguns, ammunition, and related equ Describe	uipment	
	Clothe: Examp □ No	s <i>oles</i> : Everyday clothes, furs, leather coats, designer wear,	, shoes, accessories	
	Yes.	Describe		
		Necessary clothing		\$200.00
	■ No □ Yes.	bles: Everyday jewelry, costume jewelry, engagement ring Describe	gs, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
		rm animals bles: Dogs, cats, birds, horses		
	☐ Yes.	Describe		
	□ No	her personal and household items you did not already Give specific information	y list, including any health aids you did not list	
		Handtools		\$100.00
15		the dollar value of all of your entries from Part 3, incluart 3. Write that number here		\$1,300.00
Pa	rt 4: De	scribe Your Financial Assets		
D		un or have any logal or equitable interest in any of the	following?	Current value of the

Do you own or have any legal or equitable interest in any of the following s

Current value of the portion you own?

Do not deduct secured

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De	ebtor 1	Scott Alan Lolmaugh	Case number (if known)	
			cla	ims or exemptions.
	□ No	oles: Money you have in your wallet, in your home, in a safe de		•
			Cash	\$300.00
17.		its of money oles: Checking, savings, or other financial accounts; certificates institutions. If you have multiple accounts with the same ir		and other similar
	_	Institution	ı name:	
	Examp ■ No	, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with brokerage firms, mo	oney market accounts	
		ublicly traded stock and interests in incorporated and unin	corporated businesses, including an interest in an L	.LC, partnership, and
	■ No			
	☐ Yes.	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia	nment and corporate bonds and other negotiable and non- iable instruments include personal checks, cashiers' checks, pr egotiable instruments are those you cannot transfer to someon	romissory notes, and money orders.	
	☐ Yes. 0	Give specific information about them Issuer name:		
21.	Examp	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savir	ngs accounts, or other pension or profit-sharing plans	
	■ No			
	⊔ Yes. I	List each account separately. Type of account: Institution	name:	
22.	Your sh	ty deposits and prepayments hare of all unused deposits you have made so that you may co ples: Agreements with landlords, prepaid rent, public utilities (el		thers
		Institution	name or individual:	
23.	Annuiti	ies (A contract for a periodic payment of money to you, either f	or life or for a number of years)	
	■ No □ Yes	Issuer name and description.		
24.	26 U.S.C	ts in an education IRA, in an account in a qualified ABLE p C. §§ 530(b)(1), 529A(b), and 529(b)(1).	rogram, or under a qualified state tuition program.	
	■ No □ Yes	Institution name and description. Separately file	the records of any interests.11 U.S.C. § 521(c):	
		, equitable or future interests in property (other than anyth	,	e for your benefit
	■ No	City on self-self-tempetion object the se		
		Give specific information about them		
26.	Examp	s, copyrights, trademarks, trade secrets, and other intellect poles: Internet domain names, websites, proceeds from royalties		
	No			

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$ Yes. Give specific information about them...

D	ebtor 1	Scott Alan Lolmaugh		Case number (if known)	
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, coopera	tive association holdings, li	quor licenses, professional licenses	
		Give specific information about them			
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	unds owed to you Give specific information about them, including when the specific information about the specific informat	nether you already filed the	returns and the tax years	
29.	■ No	support les: Past due or lump sum alimony, spousal supp Give specific information	ort, child support, maintena	ince, divorce settlement, property se	ettlement
30.		mounts someone owes you les: Unpaid wages, disability insurance payments benefits; unpaid loans you made to someone		y, vacation pay, workers' compensa	ation, Social Security
		Give specific information			
31.		s in insurance policies les: Health, disability, or life insurance; health sav	rings account (HSA); credit	homeowner's, or renter's insurance	;
	Yes.	Name the insurance company of each policy and Company name:	list its value.	Beneficiary:	Surrender or refund value:
		Term life thru work			\$0.00
32.	If you a someon	erest in property that is due you from someon re the beneficiary of a living trust, expect proceed he has died. Give specific information		cy, or are currently entitled to receive	e property because
33.		against third parties, whether or not you have les: Accidents, employment disputes, insurance of		demand for payment	
	☐ Yes.	Describe each claim			
34.	■ No	ontingent and unliquidated claims of every na	ture, including countercl	aims of the debtor and rights to se	et off claims
35.		ancial assets you did not already list			
	■ No	Give specific information			
36		ne dollar value of all of your entries from Part of the transfer of the transf			\$300.00
Pa	rt 5: Des	cribe Any Business-Related Property You Own or H	ave an Interest In. List any re	al estate in Part 1.	
37.	Do you o	wn or have any legal or equitable interest in any bus	iness-related property?		

■ No. Go to Part 6.

— No. Go to Fait o

Debto	Scott Alan Lolmaugh		Case number (if known)	
□ Y	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You Of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. D o	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
E	by you have other property of any kind you did not already list? ixamples: Season tickets, country club membership No Yes. Give specific information			
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			\$0.00
56. I	Part 2: Total vehicles, line 5	\$1,100.00		
57. I	Part 3: Total personal and household items, line 15	\$1,300.00		
58. I	Part 4: Total financial assets, line 36	\$300.00		
59. I	Part 5: Total business-related property, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54 +	\$0.00		
62. T	Total personal property. Add lines 56 through 61	\$2,700.00	Copy personal property total	\$2,700.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$2 700 00

Official Form 106A/B Schedule A/B: Property page 5

Fil	I in this inform	nation to identify your case:				
	ebtor 1	Scott Alan Lolmaugh				
		First Name	Middle Name	L	ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Bar	nkruptcy Court for the: NOF	RTHERN DISTRICT OF	INDIA	ANA	
Ca	ise number					
	nown)					☐ Check if this is an amended filing
O	fficial Fo	rm 106C				
S	chedule	e C: The Prope	rty You Cla	im	as Exempt	4/19
the nee	property you lis	sted on Schedule A/B: Propert d attach to this page as many of	y (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar and applicable standard applicable standard applicable standard applicable	nount as exempt. Alternative atutory limit. Some exemption nlimited in dollar amount. Ho	ly, you may claim the fons—such as those for owever, if you claim an	ull fai heal exen	th aids, rights to receive certain benption of 100% of fair market value	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identif	y the Property You Claim as	Exempt			
1.	Which set of	exemptions are you claiming	g? Check one only, eve	n if yc	our spouse is filing with you.	
	You are cla	aiming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	aiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any prop	erty you list on Schedule A/l	B that you claim as exe	empt,	fill in the information below.	
		Brief description of the property and line on Current value of the Amount of the exemption you claim Schedule A/B that lists this property portion you own				Specific laws that allow exemption
	Concadio 702	mat note time property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2000 Ford F	F150	\$1,100.00		\$1,100.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Sch	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Household		\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Sch	nedule A/B: 6.1			100% of fair market value, up to	
					any applicable statutory limit	
	Necessary	clothing nedule A/B: 11.1	\$200.00		\$200.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Sch	nedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	Handtools		\$100.00		\$100.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Sch	nedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
	Cash		\$300.00		\$300.00	Ind. Code § 34-55-10-2(c)(3)
			φ ວ υυ.υυ		φυυυ.υυ	- \ \ /\-/

Official Form 106C

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 16.1

Debto	r 1 _	Scott Alan Lolmaugh	Case number (if known)	
	Are you claiming a homestead exemption of more than \$170,350? Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or a		r after the date of adjustment.)	
	N	lo		
] Y	es. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
] No		
		Yes		

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Fill in this infor					
Debtor 1	Scott Alan Lolma	ugh			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF INDIANA		
Case number (if known)				☐ Check if this amended fil	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		0000 == -		-9 -00-		00,20,2	ugo _o		
Fill i	n this infor	mation to identify your cas	se:						
Debt	or 1	Scott Alan Lolmaug	nh						
		First Name	Middle Na	ame	Last Nam	ie			
Debt									
(Spous	se if, filing)	First Name	Middle Na	ame	Last Nam	ie			
Unite	ed States Ba	ankruptcy Court for the:	NORTHERN	I DISTRICT OF I	INDIANA				
Case	number								
(if know	_			_				☐ Ch	eck if this is an
								_ am	ended filing
∩ffi	cial Ear	n 106E/F							
		E/F: Creditors Wh	o Have	Unsecure	d Claim	e			12/15
any ex Sched Sched left. An name Part 1. D 2. L	Recutory conclude G: Exect fulle D: Credit tach the Co and case nut. 1: List A to any credit Yes. No. Go to 1 Yes. ist all of you dentify what to ossible, list the cast 1. If more For an explan	or priority unsecured claims. If ype of claim it is. If a claim has be claims in alphabetical order a than one creditor holds a particulation of each type of claim, see	at could result deases (Of led by Properties of the lecured Clair claims against lecured claims against lecured claims against lecured claim, list lecured claim, list lecured claim, list lease of the lecured claim, list lease of the lease of the lecured claim, list lease of the	alt in a claim. Also ficial Form 106G). by. If more space is to information to restance the second s	o list execute . Do not incl is needed, co report in a Po riority unsecu unts, list that If you have r s in Part 3.	ory contract ude any cre- opy the Part art, do not fi ared claim, lis claim here a nore than two	s on Schedule A/B: ditors with partially you need, fill it out, ile that Part. On the	Property (Official secured claims the number the entricop of any addition of a add	Form 106A/B) and on nat are listed in les in the boxes on the onal pages, write your
	INDIAN	IA DEPARTMENT OF					\$440.00	\$440	00 \$0.00
2.1	REVEN	IUE reditor's Name	La	st 4 digits of acco	ount number		\$110.00	\$110	.00 \$0.00
	-	BANKRUPTCY	W	hen was the debt	incurred?	2019			
		SENATE AVE						_	
		IAPOLIS, IN 46204-2253 Street City State Zip Code		of the date you fi	ile the claim	ie: Check a	Il that apply		
		ed the debt? Check one.		Contingent	ne, the claim	is. Offect a	ш шасарріу		
	Debtor 1			Unliquidated					
	Debtor 2	•		•					
				Disputed	inconirod ol	olm.			
		and Debtor 2 only		Domestic support		allii.			
		ne of the debtors and another			-				
		this claim is for a community		Taxes and certain		•	•		
	Is the claim	subject to offset?			oi personai in	jury while yo	u were intoxicated		
	■ No □ Yes			Other. Specify	state taxe	<u> </u>			
	- 162			2	state taxes	•			

Deb	otor 1 Scott Alan Lolmaugh		Case nui	mber (if known)			
2.2	Samantha Lolmaugh	Last 4 digits of account number		\$0.00	\$0.00	\$0.00	
	Priority Creditor's Name c/o Allen County Child Support 606 S CAlhoun St	When was the debt incurred?	2020				
	Fort Wayne, IN 46802 Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply			
	Who incurred the debt? Check one.	☐ Contingent		,			
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
	☐ At least one of the debtors and another	■ Domestic support obligations					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Taxes and certain other debts y ☐ Claims for death or personal inj	U				
	■ No	☐ Other. Specify					
	☐ Yes	child supp	ort				
4.	☐ No. You have nothing to report in this part. Submit to Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other Part 2.	alphabetical order of the creditor aim. For each claim listed, identify when the creditor when the cre	who holds ea	m it is. Do not list claims alrea	dy included in Par	t 1. If more	
					Total clair	m	
4.1	Afdent Dental Services	Last 4 digits of account numb	er 0323			\$1,700.00	
	Nonpriority Creditor's Name 4041 Parnell Avenue Fort Wayne, IN 46805	When was the debt incurred?	2018				
Number Street City State Zip Code		As of the date you file, the cla					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	ıred claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	not				
	■ No	☐ Debts to pension or profit-sh	aring plans, a	nd other similar debts			
	Yes	Other. Specify medical					

Depto	Scott Alan Loimaugh		Case number (if known)					
4.2	Burt, Blee, Dixon, Sutton & Bloom LLP	Last 4 digits of account number	0323	\$0.00				
	Nonpriority Creditor's Name 200 E Main St, Ste 1000	When was the debt incurred?	2018	·				
	Fort Wayne, IN 46802 Number Street City State Zip Code Who incurred the debt? Check one.	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify creditor re)					
4.3	CBCS	Last 4 digits of account number	3599	\$0.00				
	Nonpriority Creditor's Name PO box 163333 Columbus, OH 43216	When was the debt incurred?	2017					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.		,					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharir	o plans, and other similar debts					
	Yes	·	g plane, and other cirrilar dobte					
	□ res	Other. Specify collection						
4.4	Check Into Cash Nonpriority Creditor's Name	Last 4 digits of account number		\$400.00				
	1010 East Coliseum Blvd Fort Wayne, IN 46805	When was the debt incurred?	2017					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	_						
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharir	g plans, and other similar debts					
	☐ Yes	■ Other. Specify cash advar						
	— 103	Otner. Specify						

Debtor	1 Scott Alan Lolmaugh	Case number (if known)					
4.5	Coresource	Last 4 digits of account number	\$0.00				
	Nonpriority Creditor's Name PO box 2310	When was the debt incurred? 2016					
	Mount Clemens, MI 48046 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify collection					
4.6	Credit Bureau Collection Srvs	Last 4 digits of account number 8278	\$2,300.00				
	Nonpriority Creditor's Name P.O. Box 1324 Marion, IN 46952	When was the debt incurred? 2017					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify collection					
4.7	Derek Johnson	Last 4 digits of account number 1564	\$0.00				
	Nonpriority Creditor's Name PO box 524	When was the debt incurred? 2011					
	Lebanon, IN 46052 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans					
	\square At least one of the debtors and another						
	Check if this claim is for a community						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify creditor rep					

Debtor	1 Scott Alan Lolmaugh		Case number (if known)				
4.8	Farmers Insurance Group	Last 4 digits of account number	1125	\$92.00			
	Nonpriority Creditor's Name c/o Credit Collection Services PO box 55126 Poston MA 02205	When was the debt incurred?	2015				
	Boston, MA 02205 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify account					
4.9	First Premier Bank	Last 4 digits of account number	4926	\$1,000.00			
	Nonpriority Creditor's Name P.O. Box 5529	When was the debt incurred?	2016-2017				
	Sioux Falls, SD 57117 Number Street City State Zip Code						
	Who incurred the debt? Check one.	,	or chook an unat apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	debt Is the claim subject to offset?						
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify credit card					
4.1	Glenbrook MHP	Last 4 digits of account number	8650	\$1,500.00			
	Nonpriority Creditor's Name 450 S Denton Tap Rd, Unit 882	When was the debt incurred?	2018				
	Coppell, TX 75019 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify lot rent					

Debt	or 1 Scott Alan Lolmaugh		Case number (if known)	
4.1 1	Health and Hospital Corp of Marion	Last 4 digits of account number	1564	\$100.00
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ100.00
	c/o MEdshield	When was the debt incurred?	2011	
	2424 E 55th St, STe 100			
	Indianapolis, IN 46220 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Опеск ан тас арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify medical		
		- Other. Specify		
4.1 2	Helvey & Associates	Last 4 digits of account number	9141	\$0.00
	Nonpriority Creditor's Name	· ·		
	1015 E Center Street Warsaw, IN 46580	When was the debt incurred?	2020	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection		
1				
4.1 3	Lucas Reed DDS	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name 10008 Dupont Circle Fort Wayne, IN 46825	When was the debt incurred?	2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify account		

Scott Alan Lolmaugh	Case number (if known)	
One Main	Local Adigita of account number	\$3,000.0
Nonpriority Creditor's Name PO Box 1010	Last 4 digits of account number When was the debt incurred? 2016	Ψ5,000.
Evansville, IN 47706 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	. ,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Repossession	
Orthopaedics Northeast	Last 4 digits of account number	\$400.0
Nonpriority Creditor's Name		•
5050 No. Clinton St.	When was the debt incurred? 2015	
Fort Wayne, IN 46825 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	. ,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical	
Parkview Health Physicians	Last 4 digits of account number 0839	\$72.0
Nonpriority Creditor's Name		— • • • • • • • • • • • • • • • • • • •
c/o Helvey & Associates 1015 E Center St	When was the debt incurred? 2020	
Warsaw, IN 46580 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or me date year may and talling of or one of an electropy,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	_	
Yes	■ Other. Specify medical	

Scott Alan Lolmaugh	Case number (if known)	
Parkview Hospital	Last 4 digits of account number	\$2,000.00
Nonpriority Creditor's Name 10501 Corporate Drive Fort Wayne, IN 46845	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical	
Parkview Physicians Group	Last 4 digits of account number 9277	\$60.00
Nonpriority Creditor's Name P.O. Box 10416 Des Moines, IA 50306	When was the debt incurred? 2015	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	■ Other. Specify medical	
PNC Bank	Last 4 digits of account number 0948	¢500.00
Nonpriority Creditor's Name	Last 4 digits of account number U948	\$500.00
PO Box 3180	When was the debt incurred? 2015-2017	
Pittsburgh, PA 15230	As of the date were file the plainties OU . I. IIII.	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify Credit card	

Scott Alan Lolmaugh		Case number (if known)	
Professional Emergency Physicians	Lock Addinite of account number	9072	\$280.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ200.0
608 Union Chapel Rd Fort Wayne, IN 46845	When was the debt incurred?	2020	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical		
Davisa		0.444	#0.0
Revco Nonpriority Creditor's Name	Last 4 digits of account number	8411	\$0.0
PO Box 163333	When was the debt incurred?	2020	
Columbus, OH 43216			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only			
_	Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans	d Claim.	
☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	tration agreement of divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify collection		
Snow & Sauerteig LLP	Last 4 digits of account number	5991	\$0.0
Nonpriority Creditor's Name	_aot - aigito of account number		+0.0
203 East Berry St., #1100	When was the debt incurred?	2015	
Fort Wayne, IN 46802 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	o plans, and other similar debts	
□ Yes		51 ,	
□ res	Other. Specify collection		

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Debt	or 1 Scott Alan Lolmaugh		Case number (if known)	
4.2 3	SPRINGLEAF FINANCIAL SERVICES	Last 4 digits of account number	0773	\$4,300.00
	Nonpriority Creditor's Name PO BOX 3251	When was the debt incurred?	2016	
	EVANSVILLE, IN 47731-3251 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Personal Io	an	
4.2 4	Staci Bougher, Esq.	Last 4 digits of account number	8650	\$0.00
	Nonpriority Creditor's Name 614 West Berry St, # A Fort Wayne, IN 46802	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify creditor rep)	
1.2 5	Stucky, Lauer & Young LLP	Last 4 digits of account number	8278	\$0.00
<u> </u>	Nonpriority Creditor's Name 127 West Berry St., #900	When was the debt incurred?	2017	<u> </u>
	Fort Wayne, IN 46802 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	3. Oneok all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify creditor rep		
	□ 162	Other. Specify	•	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Scott Alan Lolmaugh

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 110.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 110.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 18,204.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 18,204.00

Fill in this infor	rmation to identify your	case:		
Debtor 1	Scott Alan Lolma	ugh		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				☐ Check if this is an
(,				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with	whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1		,			
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldic	Zii Gode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

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				· ·	
Fill in this	s information to identify your	case:			
Debtor 1	Scott Alan Lolma	augh			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	T OF INDIANA		
Case num	ber				
(if known)					Check if this is an amended filing
O((; .;	15 40011				
	I Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
your name	and number the entries in the and case number (if known you have any codebtors? (If). Answer every questio	n.		of any Additional Pages, write
■ No □ Ye					
□ re:	5				
	thin the last 8 years, have yona, California, Idaho, Louisiana				states and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent liv	ve with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	sure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D. line	•
	Name			☐ Schedule E/F, lii	ne
				☐ Schedule G, line	·
	Number Street City	State	ZIP Code	-	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	ne
-	Number Street			_	
	City	State	ZIP Code		

	:								
	in this information to identify you btor 1 Scott Ala	an Lolmaugh							
_	btor 2 puse, if filing)	-			_				
Uni	ited States Bankruptcy Court for	rthe: NORTHERN DISTRI	CT OF INDIANA						
	se number nown)		_				nded filing ment showi	ng postpetitior following date:	•
	fficial Form 106l					MM / DE	/ YYYY		
S	chedule I: Your Ir	ncome							12/15
spo atta	plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the	your spouse is not filing w rm. On the top of any addit	rith you, do not inclu	ıde infor	mati	on about your s	spouse. If m (if known).	nore space is	needed,
	If you have more than one job		■ Employed				ployed	g oposeo	
	attach a separate page with information about additional	Employment status	☐ Not employed				t employed		
	employers.	Occupation	Laborer						
	Include part-time, seasonal, o self-employed work.	Employer's name	Forge Staffing						
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	295 S Commerc Zanesville, IN 4						
		How long employed	there? March	2021					
Pai	rt 2: Give Details About	Monthly Income							
	imate monthly income as of thuse unless you are separated.	ne date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in	he space. Ir	nclude your no	n-filing
	ou or your non-filing spouse have e space, attach a separate shee		combine the information	on for all	empl	oyers for that pe	rson on the	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, and deductions). If not paid month			2.	\$	2,253.3	3 \$	N/A	
3.	Estimate and list monthly o	vertime pay.		3.	+\$	0.0	<u> </u>	N/A	- -
4.	Calculate gross Income. Ac	dd line 2 + line 3.		4.	\$	2,253.33	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debtor 1	Scott Alan Lolmaugh	=	Case r	number (<i>if known</i>)			
			For	Debtor 1	For Debt		
C	opy line 4 here	4.	\$	2,253.33	non-filin \$	g spouse N/A	
•	opy line 4 nere	٠.	Ψ	2,233.33	Ψ	IVA	
5. Li	st all payroll deductions:						
5a	a. Tax, Medicare, and Social Security deductions	5a.	\$	407.33	\$	N/A	
5b	·	5b.	\$	0.00	\$	N/A	
50	·	5c.	\$	4.33	\$	N/A	
50	,	5d.	\$	0.00	\$	N/A	
5∈ 5f		5e. 5f.	\$	0.00 216.67	\$	N/A N/A	
5 <u>0</u>	•	5g.	\$ 	0.00	\$	N/A	
5h	•	5h.+	· .		+ \$	N/A	
6. A (dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	628.33	\$	N/A	
		7.	· —		\$		
	alculate total monthly take-home pay. Subtract line 6 from line 4.	۲.	\$	1,625.00	Φ	N/A	
8. Li 8a	st all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
	monthly net income.	8a.	\$	0.00	\$	N/A	
8b		8b.	\$	0.00	\$	N/A	
80	 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 						
	settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
80	d. Unemployment compensation	8d.	\$	0.00	\$	N/A	
86	· · · · · · · · · · · · · · · · · · ·	8e.	\$	0.00	\$	N/A	
8f	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
89		8g.	\$	0.00	\$	N/A	
8h	n. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9. A	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	+ \$	N/	'A = \$	1,625.00
In ot Do	tate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your her friends or relatives. In not include any amounts already included in lines 2-10 or amounts that are not pecify:	depen		•	ed in <i>Sched</i>	dule J. 1. +\$	0.00
J.	ecily.				_ '	μ	0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The restrite that amount on the Summary of Schedules and Statistical Summary of Certain oplies				. if it	2. \$	1,625.00
						Combin	
13. D	o you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly	income

Official Form 106l Schedule I: Your Income page 2

Bille	in this informa	tion to identify yo	our case.			1			
Deb						Oh-	ok if this is:		
Dep	IOI I	Scott Alan L	oimaugh	l .		Che	ck if this is: An amended filing		
	tor 2 ouse, if filing)						•	ving postpetition chapte the following date:	er
` '		untoy Court for the	· NORTH	ERN DISTRICT OF INDIA	ΔΝΔ		MM / DD / YYYY		
		upicy Court for the	. NORTI	ILIN DISTRICT OF INDIP	317/2		WIWI7 DD / TTTT		
	e number nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	nses				1:	2/1
info	rmation. If m		eded, atta	. If two married people anch ch another sheet to this n.					
Par		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to		in a separ	ate household?					
	_ 100.200								
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Deb	tor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state	the						■ No	
	dependents	names.			Daughter			☐ Yes ■	
					Daughter		15	■ No □ Yes	
								□ No	
								☐ Yes	
								□ No □ Yes	
3.		enses include		No				ப 163	
		f people other t d your depende	han $_{m \Box}$	Yes					
Dor				ly Evnance					
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		n assistance an		government assistance i			Your exp	enses	
(OII	iiciai Foiiii iu	юі.)					Tour oxp		
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. S		280.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. S	B	0.00	
	•	rty, homeowner's				4b. \$		0.00	
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		25.00 0.00	
5.				our residence, such as ho	me equity loans	5.		0.00	

btor 1	Scott Alan Lolmaugh	Case num	ber (if known)	
Utilitie	s:			
6a. E	Electricity, heat, natural gas	6a.	\$	0.00
6b. \	Nater, sewer, garbage collection	6b.	\$	0.00
6c. 7	Felephone, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
6d. (Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	7.	\$	485.00
	are and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	\$	100.00
	nal care products and services	10.	\$	10.00
	al and dental expenses	11.	\$	20.00
	portation. Include gas, maintenance, bus or train fare.	11.	Ψ	20.00
	include car payments.	12.	\$	250.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	able contributions and religious donations	14.	\$	0.00
Insura	•	17.	Ψ	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	/ehicle insurance	15b.	\$	70.00
		15d.	·	
	Other insurance. Specify: Do not include toxes deducted from your pay or included in lines 4 or 20.	150.	Ψ	0.00
Specify	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	¢	0.00
. ,	ment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	¢	0.00
	Car payments for Vehicle 2	17a.	*	0.00
	1 /		·	
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report		\$	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106 payments you make to support others who do not live with you.	oi). 10.	\$	
_		40	Φ	0.00
Specify		19.	!	
	real property expenses not included in lines 4 or 5 of this form or on So Mortgages on other property	cneaule I: Yo 20a.		0.00
				0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.		0.00
Other:	Specify: car repair	21.	+\$	50.00
cigare	ettes		+\$	125.00
	ate your monthly expenses		•	4 505 00
	dd lines 4 through 21.		\$	1,565.00
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	
22c. Ac	dd line 22a and 22b. The result is your monthly expenses.		\$	1,565.00
0-1				
	ate your monthly net income.	00	Φ.	4 005 00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	1,625.00
23b. (Copy your monthly expenses from line 22c above.	23b.	-\$	1,565.00
	Subtract your monthly expenses from your monthly income.	23c.	\$	60.00
	The result is your <i>monthly net income</i> .	230.	"	00.00
For exa	a expect an increase or decrease in your expenses within the year aftermple, do you expect to finish paying for your car loan within the year or do you expect to the terms of your mortgage?			or decrease because of a
mounica				
■ No.				

Fill in this i	nformation to identify your	case.		
Debtor 1	Scott Alan Lolma First Name	ugh Middle Name	Last Name	
Debtor 2				
(Spouse if, filing	First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	Γ OF INDIANA	
Case numbe	er			
(if known)				☐ Check if this is an
				amended filing
If two marrie		r, both are equally respo	onsible for supplying corressor amended schedules.	
	th. 18 U.S.C. §§ 152, 1341, 1 Sign Below		. ,	
Did yo	u pay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?
■ No	0			
☐ Ye	es. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)		
				200 and Olymbia (Omolai 1 Om 110)
	penalty of perjury, I declare by are true and correct.	that I have read the sun	nmary and schedules filed	d with this declaration and
X /s/	Scott Alan Lolmaugh		Х	
	ott Alan Lolmaugh		Signature of D	Debtor 2
	nature of Debtor 1		-	
Dat	te May 19, 2021		Date	

Fill	in this inform	nation to identify you	r case:							
Debtor 1		Scott Alan Lolm	augh							
D-	h.t O	First Name	Middle Name	Last Name						
	btor 2 buse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Ban	nkruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA						
	ilou Olaloo Bai	induptoy Court for the.	- NORTHERN BIOTRIOT	01 1142174174						
	se number					☐ Check if this is an amended filing				
	ficial For		Affairs for Indivi	duals Filin	g for Bankruptcy	y 4/1:				
info	rmation. If me		attach a separate sheet to			sible for supplying correct les, write your name and case				
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where Yo	u Lived Before						
1.	What is your	current marital statu	ıs?							
	□ Massiasi									
		ried								
_										
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	□ No									
	Yes. List	t all of the places you	ived in the last 3 years. Do	not include where y	you live now.					
	Debtor 1 Pri	or Address:	Dates Debtor	l Debtor	r 2 Prior Address:	Dates Debtor 2 lived there				
	393 N Clinton St, Lot 11 Fort Wayne, IN 46805		From-To: 2017-2021	☐ Sam	ne as Debtor 1	☐ Same as Debtor 1 From-To:				
	0.0=70	132 Archwood Lane ort Wayne, IN		☐ Sam	ne as Debtor 1	☐ Same as Debtor 1 From-To:				
3. stat					a community property state, Puerto Rico, Texas, Wash	te or territory? (Community property nington and Wisconsin.)				
	■ No									
	☐ Yes. Mal	ke sure you fill out Sc	hedule H: Your Codebtors (0	Official Form 106H)).					
Pa	rt 2 Explair	n the Sources of You	ır Income							
4.	Fill in the total	I amount of income yo	nployment or from operation received from all jobs and have income that you recei	all businesses, inc		revious calendar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income	Gross incom		come Gross income				
			Check all that apply.	(before deduc exclusions)						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Scott Alan Lolmaugh Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$8,000.00 ☐ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips \square Operating a business ☐ Operating a business For last calendar year: \$31,231.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$30,228.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income from** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: 401k cash in \$1,800.00 (January 1 to December 31, 2020) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? \square No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Case number (if known)

7.	Within 1 year before you filed for bankruptur Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporations ent, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a dek	ot that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
	No. Go to line 11.☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
11	Within 90 days before you filed for bankrup	Explain what happened		annoial institution	oot off any an	aunto from vour
	accounts or refuse to make a payment bec		uding a bank of th	ianciai msutution	, set on any an	lounts from your
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the benefi	t of creditors, a
	■ No □ Yes					
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gifts	with a total value	of more than \$60	0 per person?	
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Scott Alan Lolmaugh

Case number (if known)

14.	Within 2 years before you filed for bankrup ■ No	tcy, c	lid you give any gifts or contribution	ns with a tota	l value of more than	n \$600 to any charity?
	Yes. Fill in the details for each gift or con	tributi	on			
	Gifts or contributions to charities that totamore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankruptor gambling?	cy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	eft, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
		escri	be any insurance coverage for the lo	oss	Date of your	Value of property
			the amount that insurance has paid. Lace claims on line 33 of Schedule A/B:		loss	lost
Par	t 7: List Certain Payments or Transfers					
	Include any attorneys, bankruptcy petition pre No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Ripke Law 4705 Illinois Road, Ste 101 Fort Wayne, IN 46804 ripkelaw@live.com		Description and value of any prop transferred Attorney Fees		Date payment or transfer was made April 2021	Amount of payment
17.	Within 1 year before you filed for bankruptor promised to help you deal with your credit. Do not include any payment or transfer that you have the second of	ors o	r to make payments to your creditor		r transfer any prop	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your landled both outright transfers and transfers minclude gifts and transfers that you have alread No	ousin nade a	ess or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.		Description and value of	Dogariba	ny proposty os	Date transfer was
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	made made
	Person's relationship to you					

Debtor 1 Scott Alan Lolmaugh

Debtor 1	Scott	Alan	Lol	lmaud	ık

Case number (if known)

19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device (of which you are a
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Par	List of Certain Financial Accounts, Insti	ruments, Safe Deposi	t Boxes, and S	torage Unit	ts	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accou	nts; certificates	s of deposi		
		Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed fo	r bankruptcy, a	ny safe de _l	posit box or other deposi	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. 					y?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
	19: Identify Property You Hold or Control fo					
23.	Do you hold or control any property that som for someone. No	eone else owns? Incl	ude any proper	ty you bor	rowed from, are storing f	or, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property (Number, Street, City, Street, City, Street, City, Street, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Infor	mation				
For	the purpose of Part 10, the following definition	ns apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	environmental	law, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		as a hazardous	s waste, ha	zardous substance, toxid	substance,

 $Report\ all\ notices, releases, and\ proceedings\ that\ you\ know\ about,\ regardless\ of\ when\ they\ occurred.$

Debtor 1	Scott	Alan	Lolmaugh	

Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
Hav	e you notified any governmental unit of					
	No Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	No Yes. Fill in the details.					
		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
11:	Give Details About Your Business or	Connections to Any Business				
With	nin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the following connections to an	y business?		
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation				
	No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill	in the details below for each business	i.			
		Describe the nature of the business	Employer Identification number Do not include Social Security			
(Nur	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed			
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include institutions, creditors, or other parties.				ude all financial		
	No					
	Yes. Fill in the details below.					
Nar	ne	Date Issued				
	Nar Add Have Cass Cass Mith With With With	No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adr No Yes. Fill in the details. Case Title Case Number Give Details About Your Business or Within 4 years before you filed for bankrupt A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to it Yes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Describe the nature of the business Name of accountant or bookkeeper No Yes. Fill in the details below.	No Yes. Fill in the details. Name of site		

Case 21-10600-reg Doc 1 Filed 05/19/21 Page 42 of 53

Debtor 1 Scott Alan Lolmaugh		Case number (if known)
Part 12: Sign Below		
are true and correct. I understand th	at making a false statement, concealing fines up to \$250,000, or imprisonment f	hments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection or up to 20 years, or both.
/s/ Scott Alan Lolmaugh		
Scott Alan Lolmaugh Signature of Debtor 1	Signature of Debto	or 2
Date May 19, 2021	Date	
Did you attach additional pages to Y ■ No □ Yes	'our Statement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someon ■ No	e who is not an attorney to help you fill	out bankruptcy forms?
☐ Yes. Name of Person . Attac	h the Bankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your case:		
Debtor 1	Scott Alan Lolmaugh		
		Name Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle	e Name Last Name	
United States Ba	ankruptcy Court for the: NORTHE	RN DISTRICT OF INDIANA	
Case number (if known)			☐ Check if this is an
			amended filing
Official Fo	vrm 100		
		o divide ala Filim e Un dan Ol	
Stateme	nt of intention for i	ndividuals Filing Under Cl	napter / 12/15
16	Baldwal CR and an about a 7	annual CIII and the Committee	
	lividual filing under chapter 7, you re claims secured by your property		
_	sed personal property and the leas		
You must file th	is form with the court within 30 day	ys after you file your bankruptcy petition or by the	
whiche on the		ends the time for cause. You must also send cop	ies to the creditors and lessors you list
on the	101111		
	eople are filing together in a joint on a foint on the form.	case, both are equally responsible for supplying o	orrect information. Both debtors must
J			
	and accurate as possible. If more a your name and case number (if kno	space is needed, attach a separate sheet to this form	orm. On the top of any additional pages,
write y	our name and case number (if kno	, wii).	
Part 1: List Y	our Creditors Who Have Secured (Claims	
1. For any credit	tors that you listed in Part 1 of Sch	edule D: Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
information be	elow. editor and the property that is collate	eral What do you intend to do with the prop	erty that Did you claim the property
identity the cr	editor and the property that is conati	secures a debt?	as exempt on Schedule C?
0		_	_
Creditor's name:		☐ Surrender the property.	□ No
name.		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of	f	Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	
securing debt	:		
Creditor's			
name:		☐ Surrender the property.	□ No
name.		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of	f	Reaffirmation Agreement.	
property		Retain the property and [explain]:	
securing debt	:	1. 21. 2. 2. 2. 2. 1. 2	
Creditor's		П О man a dearth	
name:		☐ Surrender the property.	□ No
namo.		☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of	f	Reaffirmation Agreement.	- :
property		Retain the property and [explain]:	
securing debt	:	,	

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

Deb	otor 1 Scott Alan Lolmaugh	Case number (if known)	
n	name:	Retain the property and redeem it.	☐ Yes
	Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	
	property	Retain the property and [explain]:	
S	ecuring debt:		-
or n th	t 2: List Your Unexpired Personal Property Leases any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Une may assume an unexpired personal property lease if t	expired leases are leases that are still in effect; the	lease period has not yet ended.
Des	scribe your unexpired personal property leases		Will the lease be assumed?
	sor's name:		□ No
	scription of leased		_
Pro	perty:		☐ Yes
Les	sor's name:		□ No
	scription of leased		_
Pro	perty:		☐ Yes
	sor's name:		□ No
	scription of leased		
Pro	perty:		☐ Yes
	sor's name:		□ No
	scription of leased perty:		☐ Yes
Les	sor's name:		□ No
	scription of leased		
F10	perty:		☐ Yes
	sor's name:		□ No
	scription of leased perty:		☐ Yes
Les	sor's name:		□ No
	scription of leased		
Pro	perty:		☐ Yes
Par	t 3: Sign Below		
	er penalty of perjury, I declare that I have indicated my perty that is subject to an unexpired lease.	rintention about any property of my estate that sec	ures a debt and any personal
Χ	/s/ Scott Alan Lolmaugh	X	
	Scott Alan Lolmaugh Signature of Debtor 1	Signature of Debtor 2	
	Date May 19, 2021	Date	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$24	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$33	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Indiana

	1101	thein District of Indian					
In re	Scott Alan Lolmaugh		Case No				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)			
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	722.00	_		
	Prior to the filing of this statement I have received		\$	722.00			
	Balance Due			0.00	-		
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other persor	unless they are me	mbers and associa	ates of my law firm.		
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				f my law firm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	b. Preparation and filing of any petition, schedules, sta	the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; and filing of any petition, schedules, statement of affairs and plan which may be required; tion of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; tisions as needed!					
	Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation	emption plannin n and filing of mo	g; preparation a tions pursuant	and filing of t to 11 USC		
б.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			aces, relief from	n stay actions or		
		CERTIFICATION					
	I certify that the foregoing is a complete statement of ar ankruptcy proceeding.	ny agreement or arrangement fo	or payment to me for	representation of	f the debtor(s) in		
N	lay 19, 2021	/s/ Holly M. Ripk	e				
Date		Holly M. Ripke					
		Signature of Attorn Ripke Law	ey				
		4705 Illinois Roa					
		Fort Wayne, IN 4 260-434-1990 F	16804 av: 260-424-1099				
		ripkelaw@live.co					
		Name of law firm					

(6/2010)								
		d States Bankruptcy Court orthern District of Indiana						
In re	Scott Alan Lolmaugh		Case No.					
		Debtor(s)	Chapter	7				
VERIFICATION OF CREDITOR MATRIX								
The above-named debtor(s) verifies under penalty of perjury that the attached list of creditors is true and correct to the best of his/her knowledge.								
Date:	May 19, 2021	/s/ Scott Alan Lolmaugh						
		Scott Alan Lolmaugh						

Signature of Debtor

AFDENT DENTAL SERVICES 4041 PARNELL AVENUE FORT WAYNE, IN 46805

BURT, BLEE, DIXON, SUTTON & BLOOM LLP 200 E MAIN ST, STE 1000 FORT WAYNE, IN 46802

CBCS PO BOX 163333 COLUMBUS, OH 43216

CHECK INTO CASH 1010 EAST COLISEUM BLVD FORT WAYNE, IN 46805

CORESOURCE PO BOX 2310 MOUNT CLEMENS, MI 48046

CREDIT BUREAU COLLECTION SRVS P.O. BOX 1324 MARION, IN 46952

DEREK JOHNSON PO BOX 524 LEBANON, IN 46052

FARMERS INSURANCE GROUP C/O CREDIT COLLECTION SERVICES PO BOX 55126 BOSTON, MA 02205

FIRST PREMIER BANK P.O. BOX 5529 SIOUX FALLS, SD 57117 GLENBROOK MHP 450 S DENTON TAP RD, UNIT 882 COPPELL, TX 75019

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HELVEY & ASSOCIATES 1015 E CENTER STREET WARSAW, IN 46580

INDIANA DEPARTMENT OF REVENUE ATTN BANKRUPTCY 100 N SENATE AVE INDIANAPOLIS, IN 46204-2253

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